PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

10826100

		(Colum	(Column 1)		(Column 2)		TYPE			OR SMALL ENTITY		
TOTAL CLAIMS			1,6	1,6			I	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FE	E 385.0	OR	BASIC FEI	+
TOTAL CHARGEABLE CLAIMS			16 m	16 minus 20=		• 0		X\$ 9=		7	1	
INDEPENDENT CLAIMS			/ minus 3 = *		* 1	1			 		 	
М	JLTIPLE DEPE	NDENT CLAIM F	RESENT					X43=	 	OR	X86=	
+ 1/		- in a luma dia	long than page and a MOT is and					+145=		OR	+290=	
- 11	•	,		less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	7705
	(AMENDE	MENDED - PART II				_			OTHER	
(Column 1)			(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESI	ENTATION OF M	OLTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
					٠		L	TOTAL		- '	TOTAL	
		(Cal.,	-	<i>(</i> 0.1	<u>.</u> .		AD	DIT. FEE		JOR	ADDIT. FEE	
		(Column 1)	 	(Columi		(Column 3)	_					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= .	\vdash	X43=		1 1	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT (LAIM		┢	A43=	 -	OR	X80=	
							Ŀ	145=		OR	+290=	
							ADI	TOTAL DIT. FEE		OR ,	TOTAL DDIT. FEE	
		(Column 1)		(Column	1:2) ((Column 3)	7.0.	J. (
Ž -	`	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	F	RATE	ADDI- FEE		RATE	ADDI- TIONAL
	Total	*	Minus	**		=	1	\$ 9=	1 66	<u>_</u>	X\$18=	FEE
	Independent	*	Minus	***		=	\vdash			OR		
<u>`</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ľ	(43=		OR	X86=	
. 15	the entry in and	nn 1 in lass at					+	145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OF TOTAL ADDIT. FEE												
· TI	he "Highest Num	ber Previously Paid	For" (Total or	o SPACE is le Independent)	is the h	3, enter "3." ighest number (opriate box			